

Quinine sulfate (Qualaquin) Prior Authorization Criteria for the TRICARE Pharmacy (TPHARM) Program

Background

Quinine sulfate (Qualaquin) is FDA approved only for the treatment of malaria, alone or in combination with other agents. Use of quinine sulfate for prevention of malaria is not recommended. Use of quinine sulfate for prevention of leg cramps is an off-label use that is both not supported by the clinical evidence and not covered by TRICARE.

The following criteria were established by the DoD Pharmacy & Therapeutics (P&T) Committee.

Prior Authorization Criterion for Quinine sulfate (Qualaquin)

Coverage is approved if:

1. The patient has a diagnosis of malaria requiring treatment with quinine sulfate and the patient has been informed of the risks and benefits of treatment with quinine sulfate.

Criterion approved through the DoD P&T Committee process May 2010

www.tricare.mil is the official Web site of the TRICARE Management Activity, a component of the Military Health System Skyline 5, Suite 810, 5111 Leesburg Pike, Falls Church, VA 22041-3206

